FAX TRANSMISSION

DATE: May 23, 2007

PTO IDENTIFIER: **Application Number**   09/889,508
                       Patent Number

Inventor: Masaou MATSUDA et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: MORRISON & FOERSTER LLP

         Jonathan Bockman

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Attorney Dkt. #:   358362010400

PAGES (Including Cover Sheet):   9

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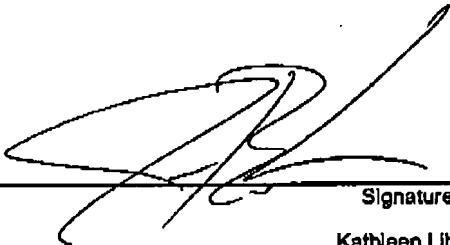
Application No. (If known): 09/669,508	Attorney Docket No.: 358362010400

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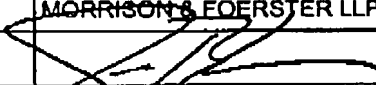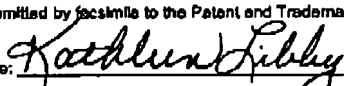
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TRANSMITTAL FORM	**Application Number** 09/889,508
	Filing Date October 18, 2001
	First Named Inventor Masaou MATSUDA
	Art Unit 1771
(to be used for all correspondence after initial filing)	**Examiner Name** J. A. Steele
Total Number of Pages In This Submission 6	**Attorney Docket Number** 358362010400

ENCLOSURES (*Check all that apply*)

[x] Fee Transmittal Form	[ ] Drawing(s)	[ ] After Allowance Communication to TC
[ ] Fee Attached	[ ] Licensing-related Papers	[ ] Appeal Communication to Board of Appeals and Interferences
[ ] Amendment/Reply	[ ] Petition	[x] Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
[ ] After Final	[ ] Petition to Convert to a Provisional Application	[ ] Proprietary Information
[ ] Affidavits/declaration(s)	[ ] Power of Attorney, Revocation Change of Correspondence Address	[ ] Status Letter
[ ] Extension of Time Request	[ ] Terminal Disclaimer	[x] Other Enclosure(s) (please Identify below):
[ ] Express Abandonment Request	[ ] Request for Refund	Request for Oral Hearing
[ ] Information Disclosure Statement	[ ] CD, Number of CD(s) _____	
[ ] Certified Copy of Priority Document(s)	[ ] Landscape Table on CD	
[ ] Reply to Missing Parts/ Incomplete Application	**Remarks**	
[ ] Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MORRISON & FOERSTER LLP
Signature	*(signature)*
Printed name	Jonathan Bockman
Date	May 23, 2007 Reg. No. 45,640

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Effective on 12/08/2004.	**Complete If Known**	
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	09/889,508
FEE TRANSMITTAL	Filing Date	October 18, 2001
	First Named Inventor	Masaou MATSUDA
For FY 2007	Examiner Name	J. A. Steele
☐ Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1771
TOTAL AMOUNT OF PAYMENT ($) 1,000.00	Attorney Docket No.	358362010400

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee ($)	Small Entity Fee ($)	Fee ($)	Small Entity Fee ($)	Fee ($)	Small Entity Fee ($)	Fees Paid ($)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee ($)	Fee Paid ($)	Multiple Dependent Claims	
				Fee ($)	Fee Paid ($)
_____ - 20 = _____ x _____ = _____				_____	_____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee ($)	Fee Paid ($)
_____ - 3 = _____ x _____ = _____			

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)	Fee Paid ($)
_____ - 100 = _____	/50 = _____	(round up to a whole number) x _____	=	_____

4. OTHER FEE(S)

	Fees Paid ($)
Non-English Specification, $130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1403 Request for oral hearing	1,000.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent) 45,640	Telephone (703) 760-7769
Name (Print/Type) Jonathan Bockman			Date May 23, 2007

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